

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

CLAIM NO. 870117
APPLICANT(S)

FILED DATE

3-31-06

CLAIMS

	AS FILED		DELETED AMENDMENT		AFTER 3RD AMENDMENT	
	NO	DEP	NO	DEP	NO	DEP
1	/	/	/	/	/	/
2		/	/	/	/	/
3		/	/	/	/	/
4		/	/	/	/	/
5		/	/	/	/	/
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7		/	/	/	/	/
8	/	GN	/	/	/	/
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TOTAL NO.	4		2		1	
TOTAL DEP.	17		9		8	
TOTAL CLAIMS	21		9		8	
TOTAL NO.						
TOTAL DEP.						
TOTAL CLAIMS						